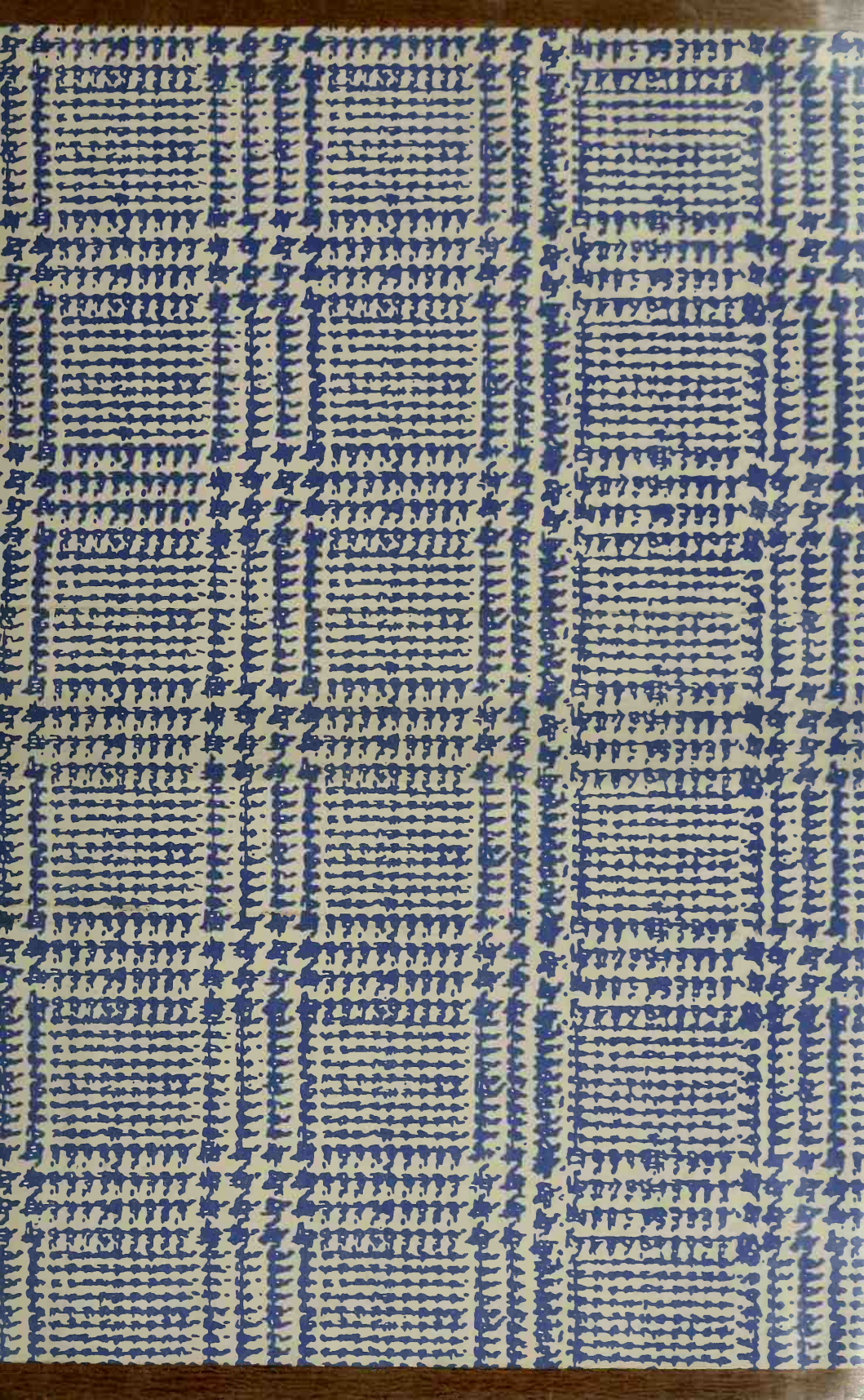

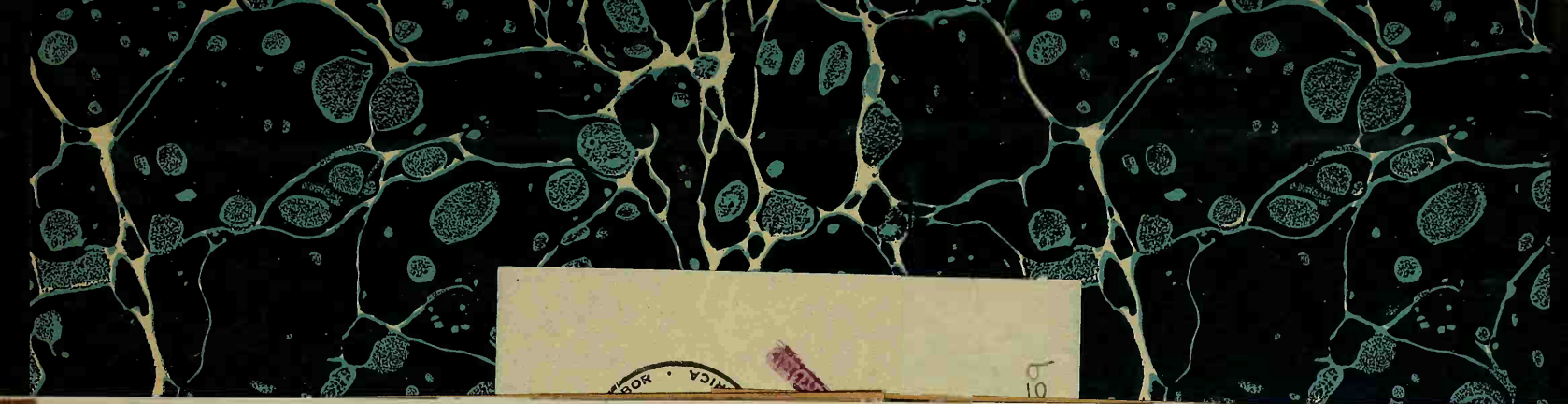

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THE NEWS LETTER

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Number 50 NEW YORK, N. Y. February, 1925

THE WILMER INSTITUTE

It is announced that the Wilmer Institute, the first great hospital, teaching and research institute of its kind in America, will be opened in September.

That much of the three million dollars necessary for the establishment of this Institute was raised in an incredibly short space of time bears witness not only to the need, but to the great work of Dr. William Holland Wilmer, one of the leading ophthalmologists of the world, who has retired from private practice in order to devote himself to research on problems connected with diseases of the eye.

TESTS FOR VISUAL ACUITY

In many school systems teachers are being required to make preliminary tests of the visual acuity of the children in their classes. Considerable confusion is resulting in the interpretation of what appears to many to be a fractional method of expressing the results. Thus in a large number of cases the record of a child testing 20/40 is interpreted to mean that the child has only one-half or 50 per cent vision. This is very far from the fact. The actual loss of vision in this case, according to the scientifically worked out tables of Chapman and of the Chicago Ophthalmological Society, is between ten and eleven per cent, sufficient loss, to be sure, to require skilled attention, but leaving a very workable visual acuity of from 89 to 90 per cent. The actual meaning of the expression 20/40 is that the child having this record is able to read at a distance of twenty feet from the chart no better than the line he should be able to read at forty feet were his visual acuity normal.

SIGHT SAVING CLASSES

At the beginning of the new school term, February, 1925, there were 207 sight saving classes in the United States. These represent 15 states and 57 cities.

NEWS OF THE JUNIOR COMMITTEE

In cooperation with the Clinton Neighborhood Conference, the Junior Committee is initiating a demonstration eye clinic for pre-school children at Hartley House, 413 W. 46th Street, New York City. A report of the clinic, which will be run as a demonstration for a limited period, will be made at a later date.

COURSES IN LIGHTING

Two most interesting and intensely practical courses in lighting have recently been given for women, the first by the Edison Lamp Works of the General Electric Company at Harrison, N. J., the second by Nela Park School of Lighting of the General Electric Company, Cleveland, Ohio. Each course covered a week of intensive training during which time every possible opportunity was afforded the students to become familiar with the best methods of lighting from utilitarian and decorative standpoints.

The General Electric Company extended the courtesy of attending these courses to the staff of the National Committee for the Prevention of Blindness, two members of which were able to take advantage of this opportunity.

OPHTHALMIA NEONATORUM AS A CAUSE OF BLINDNESS

In presenting the following statistics,* the National Committee for the Prevention of Blindness cannot vouch for their accuracy, since some schools are still dependent upon records received from parents who may be ignorant of the real cause of blindness.

In computing values another difficulty presents itself. In classes for the blind in public school systems, all the children are blind; in schools for the blind there are many children with considerable vision for whom no sight saving classes are available; hence the percentage of the classes cannot be fairly compared with the percentage in the schools. The value of the statistics lies in the fact that there is doubtless the same general incidence of error from year to year so that the decrease in total percentage may be considered as indicating with a fair amount of accuracy the gradual decrease in blindness from this disease.

* See pages 4 and 5.

California

The University of California, Berkeley, has a new acuity laboratory in which teachers are being trained to make tests. The laboratory is 135 feet long, 8 feet wide and 8 feet high; the scale of distances has been marked on the baseboard. The laboratory is light proof and practically sound proof. The apparatus is lighted by a pair of daylight lamps so arranged as to allow diffused and reflected light to play on the standard charts. This arrangement gives very little variation in illumination and the baseboard scales make it possible to read distances rapidly and accurately.

Indiana

Writing at the beginning of the school year, Mr. George B. Wilson, Superintendent of the Indiana School for the Blind, says: "We are expecting 165 pupils in the school. . . . This is just three more than were in the school the day I took charge twenty-six years ago. I attribute the lower proportionate number to the fact that children's eyes at birth are getting more attention every year through the enforcement of state health laws."

Kentucky

Notes from the Pine Mountain Settlement School tell of a lad of nineteen shambling into school apparently deformed or crippled and none too bright. The doctor looked him over and to everyone's astonishment nothing was really wrong with him except his eyes; he was so near sighted that he hardly saw the road he traveled. Virgil, whose mind proved him not unworthy of this distinguished name, guessed at the glory that would give his real self a chance to develop by taking away his handicap—"I reckon I'll live in a new world when I get my glasses."

Minnesota

A workman who loses an eye through an industrial accident, even though he is blind in that eye, is entitled to compensation under the Workmen's Compensation Law of Minnesota.

The decision was made in the case of N. C. Mosgard, of Minneapolis, who was denied compensation for the loss of an eye in which he had been blind since infancy. He appealed to the Industrial Commission, which awarded him $18 a week for 102 weeks; this decision was affirmed by the Minnesota Supreme Court.

(Continued on page 6)

PROPORTION OF PUPILS BLIND FROM OPHTHALMIA NEONATORUM IN FORTY-EIGHT SCHOOLS AND CLASSES FOR THE BLIND, 1923–24

Schools	Total Pupils 1923–24	Total Pupils Blind from O. N.	Per-cent	New Admis-sions 1923–24	New Pupils Blind from O. N.	Per-cent
Arkansas School for the Blind	92	21	22.8	15	0	.0
California School for the Deaf and Blind	104	31	29.8	19	2	10.5
Colorado School for the Deaf and Blind	62	12	19.3	12	1	8.3
Connecticut School for the Blind	67	10	14.9	17	2	11.8
Idaho State School for Deaf and Blind	18	4	22.2	10	1	10.0
Illinois School for the Blind	233	54	23.1	39	5	12.8
Indiana School for the Blind	151	27	17.8	25	1	4.0
Iowa College for the Blind	113	21	18.5	11	3	27.2
Kansas School for the Blind	120	27	22.5	18	2	11.1
Kentucky School for the Blind	108	35	32.4	14	5	35.7
Louisiana State School for the Blind	73	7	9.5	9	0	.0
Maryland School for the Blind	112	19	16.9	11	1	9.0
Massachusetts School for the Blind and Perkins Institute	296	56	18.9	34	2	5.8
Michigan School for the Blind	175	5	2.8	23	0	.0
Minnesota School for the Blind	151	20	13.2	44	1	2.2
Mississippi Institute for the Blind	83	14	16.8	6	0	.0
Missouri School for the Blind	127	29	22.8	23	2	8.6
Montana School for the Deaf and Blind	25	7	28.0	2	1	50.0
Nebraska School for the Blind	66	13	19.7	13	1	7.7
New Mexico Institute for the Blind	82	26	31.7	14	1	7.1
New York Institute for the Education of the Blind	114	22	19.2	26	7	26.9
New York State School for the Blind	151	34	22.5	23	3	13.0
North Dakota School for the Blind	36	4	11.1	5	2	40.0
Ohio State School for the Blind	297	79	26.6	50	10	20.0

Oklahoma School for the Blind	135	30	22.2	15	0	.0
Oregon State School for the Blind	49	1	2.0	10	0	.0
Pennsylvania Institution for the Instruction of the Blind	251	64	25.4	34	7	20.5
Western Pennsylvania Institution for the Blind	135	45	33.3	12	2	16.6
South Dakota School for the Blind	36	5	13.8	5	0	.0
Tennessee School for the Blind	170	27	15.9	36	5	13.8
Texas School for the Blind	239	48	20.0	32	4	12.5
Utah State School for the Deaf and Blind	30	4	13.3	1	1	100.0
Virginia School for the Deaf and Blind	79	14	17.7	17	3	17.6
Washington State School for the Blind	71	6	8.4	8	1	12.5
Wisconsin School for the Blind	116	45	38.7	15	7	46.6
	4,167	866	20.7	648	83	12.8
CLASSES						
California—Los Angeles	24	3	12.5	6	2	33.3
Illinois—Chicago	49	5	10.2	6	0	.0
Michigan—Detroit	18	10	55.5	3	1	33.3
Minnesota—Minneapolis	15	5	33.3	1	0	.0
New Jersey—Newark	23	5	21.7	3	0	.0
Paterson	9	0	.0	9	0	.0
New York—Buffalo	14	0	.0	4	0	.0
New York	113	20	17.6	17	4	23.5
Ohio—Cincinnati	14	3	21.4	3	0	.0
Cleveland	39	9	23.0	6	0	.0
Toledo	21	4	19.0	5	1	20.0
Youngstown	30	0	.0	7	0	.0
Wisconsin—Milwaukee	18	5	27.7	5	0	.0
Racine	6	0	.0	0	0	.0
	393	69	17.5	75	8	10.7
GRAND TOTAL	4,560	935	20.5	723	91	12.6

NEW YORK

Buffalo reports no case of blindness or of scars from ophthalmia neonatorum for the past nine years.

The *School Health News* of December, 1924, published by the Bureau of Health Education of the New York City Department of Health, prints two letters of special interest to New Yorkers. The first is addressed to the Principals of the Elementary and High Schools of the Borough of the Bronx, informing them that the Bronx Rotary Club has created a fund to furnish eyeglasses to children with defective vision whose parents are unable to purchase corrective lenses for them.

The second is a letter from Miss Frances E. Moscrip, Supervisor of Classes for the Blind and Sight Saving Classes, stating that it is the opinion of Miss Farrell, Inspector of Ungraded Classes, who recently returned from a visit to England, France, Switzerland, Germany and Russia, where she had every opportunity to examine the work of special classes, that "we are doing the best work in the world for our handicapped children."

"A report of this kind from an expert is most encouraging to us who meet with so many obstacles and such broad criticism," says Miss Moscrip. "It will stimulate us to carry on the work we so firmly believe in."

OHIO

Cleveland held a most successful Sight Saving Day, January 15th. Free clinics were held in 16 hospitals with day and evening hours. Even hospitals having no regular eye clinics arranged special clinics and the oculists of the city gave most generously of their time and skill. Eighteen hundred people were examined. Many of them had no important defects, but some were saved from actual blindness by the fact that they were seen then and not later.

CHINA

A special course in ophthalmology has been arranged by the Pekin Union Medical College to be given in the Chinese language.

BOOKS, BULLETINS AND ARTICLES OF INTEREST

THE EYES OF YOUTH, Current Comment, *The Journal of the American Medical Association*, January 17, 1925. Published by the American Medical Association, 535 North Dearborn Street, Chicago, Illinois.

"Among the categories of physical impairment that formed the basis of rejections of young men from service by the draft boards in this country during the World War, defective eyes had noteworthy prominence. In a group of army candidates examined in Detroit, Brooklyn and New York, for example, 29 percent. in all were rejected; among them the largest number, 6 per cent., showed unacceptable conditions of the eyes. The widespread use of glasses in many communities and the unauthentic gossip among the school population, taken in connection with the facts just recited, tend to give the impression that our eyes, considered as physiologic and optical mechanisms, fall far short of the perfection that we are wont to expect of the human organism. Perhaps we have become unduly pessimistic. In recent tests made by officers of the United States Public Health Service for defective vision on approximately ten thousand school-children in four Eastern localities, 63 percent. of these young persons, ranging in age from 6 to 16 years, were found to be normal in both eyes; only 10 per cent. had rather poor vision in one or both eyes. Nature's equipment of man for vision is therefore not as imperfect as a hasty guess might suggest. It should be recalled, furthermore, that the eyes are among the organs most commonly strained in modern life."

A Call for Better Lighting, George W. Alder, *Good Housekeeping*, February, 1925. Published by the International Magazine Co., Inc., 119 West 40th St., New York. The author discusses the lighting problems of the home and the school and suggests methods of obtaining adequate light without glare, according to the type of work to be carried on in each room.

In speaking in particular of evening school sessions, Mr. Alder says: "Improperly lighted class rooms are occupied each night by boys and girls who have been working in the daytime using their eyes for twelve or more hours. In school they are required to sit, read and write for another two hours or more in improperly lighted rooms. Coming at the end of a working day, this final abuse of the eyes is apt to be the straw that breaks the camel's back."

"Spec's is Spec's" for Those to Whom All Eyes Look Alike, *Red Cross Courier*, December 6, 1924. Published by the American Red Cross, Washington, D. C. An excerpt is given from the report of a nurse:

"I recently visited a family, several of whom had trachoma. At the next house an old lady said: 'Are you doing anything for them folks with the sore eyes?' When I assured her that we were doing all that we could, she said: 'Well, 'tain't no use. That there woman don't appreciate nothin' you do for her. Why, I had a pair of good spec's here that my sister left me when

she died. They were too young for me, so I give them to this woman—and I don't believe she has wore them a single time.'"

The brief article goes on to say—"Nurses have often reported cases where people have bought spectacles from peddlers, not realizing that it requires a highly trained specialist to prescribe the proper glasses. The worst of it is that, in addition to wasting their money, many of them are ruining good eyes by straining them through using unsuitable lenses."

THE WAR AGAINST BLINDNESS, *The Literary Digest*, November 29, 1924. Published by Funk and Wagnalls Co., New York. An abstract of an article on this subject by Dr. Edward F. Glaser, of the California State Board of Health, gives practical suggestions on the care of the eyes.

THE PSYCHOLOGY OF THE CRIMINAL, M. Hamblin Smith, M.A., M.D. Published by Robert McBride & Co., 17 West 16th Street, New York.

"It is not necessary to point out how certain physical defects may be very strong incentives towards delinquency. Tuberculosis, heart disease, hernia, defects of vision, etc., may all be, in a sense, 'causes' of delinquency, inasmuch as they prevent, or tend to prevent, the sufferer from earning a living in the ordinary labor market."

"There can be no doubt that physical disabilities are of importance in the production of delinquency. And they should be, if possible, remedied. Visual defects should be corrected by suitable spectacles."

"In considering the evil effects of bad physical conditions, we must remember that it is not only the effect upon the sufferer's working powers which has to be taken into account. The matter goes deeper, and may start earlier than would be accounted for in that way. Take the case of a boy with very defective vision. The defect may not be known to anyone. But the boy will not be able to do his work at school. Consequently he may be in constant trouble with his teachers, and be rebuked and punished for carelessness, inattention, and stupidity. Ignorant of the real cause of his trouble, and conscious that he has been doing his best, a mental conflict will be established. With our modern system of school medical inspection such cases are now discovered and rectified. But it is likely that a delinquent career in many older offenders may have been started in just this way. The same considerations hold good in cases of deafness, enlarged tonsils, adenoids, etc."

THE WORK OF THE BUREAU OF CHILD HYGIENE, Dr. J. L. Blumenthal, *Monthly Bulletin of the Department of Health, City of New York*. Published by the Health Department, City of New York, 505 Pearl Street, New York. This article presents the various

phases of the work of the Bureau, including medical school inspection, examinations for physical defects, contagious eye and skin diseases found in school and excluded, treatment obtained for physical defects, etc.

Of 299,453 children examined, 27,763 were found to have defective vision.

Of 2,786,463 children inspected for contagious eye and skin diseases, there were found 327 cases of trachoma and 4,732 cases of conjunctivitis. In reporting on the work of the sight saving classes, the *Bulletin* says: "Hundreds, possibly thousands, of sufferers from progressive myopia and other eye conditions which eventually may lead to blindness have had their vision preserved or restored through the functioning of the sight conservation classes.

"Our special sight conservation clinic received 8,456 visits from more than 1,861 children of the sight conservation classes and candidates for admission to them. Splendid results are obtained in improvement of vision as well as in mental acuity, as is shown by the fact that many such handicapped children make noteworthy records, in some cases leading their grades and in many others changing from apparently mentally defective or backward children to normal mentality, with ability to carry on the regular work of the grade for their age."

Is the Indian Susceptible to Health Education, A. J. Chesley, M.D., *American Journal of Public Health*, February, 1925. Published by the American Public Health Association, 370 Seventh Avenue, New York. Deals chiefly with studies made of the Chippewa Indians of Minnesota. Gives considerable attention to the menace of trachoma and the steps being taken to eradicate it. Presents Dr. Crumbine's suggestion that Chippewa nurses be employed to undertake public health work, since experience has shown that little progress has been made by white nurses, field matrons, or other workers among the Indians. "Considering that the Indian nurses know the customs of the people, understand their point of view and speak their language, it is believed they might earn the confidence of the Indians and induce them to do the things which would benefit the children."

Conjunctivitis in Swimmers (Belgian Correspondent), *Journal of the American Medical Association*, February 7, 1925. This article reports a peculiar form of acute follicular conjunctivitis, usually unilateral, with the right eye most frequently affected. This localization is attributed to the mode of swimming called the crawl, in which the right side of the head remains under water.

Increased vigilance is recommended in enforcing the rules of cleanliness in bathing establishments, greater care in changing the water frequently and the addition of antiseptics to the water.

Of Interest to Industrial and Social Workers

Workmen's Compensation Laws Affecting Injuries to the Eye, Harry Best, *American Bar Association Journal*, January, 1925. Published by the American Bar Association, 38 South Dearborn Street, Chicago, Illinois. Presents a most careful résumé of a number of cases dealing with compensation for eye injuries. The author sums up: "On the whole, a note of increasing liberality is to be discerned in the construction of the workingmen's compensation laws, so far as their bearing on the loss of sight is concerned. Gratifying as this is, a far more important result, and a result toward which the force of the whole legislation should tend, will be the introduction of such safeguards and the insistence upon such care that loss of sight in industry will have become mostly a thing of the past."

Special Bulletin No. 127, Department of Labor, State of New York, November, 1924. Deals with a study of 500 women compensated for permanent partial injuries in industry. Nine accidents to the eyes are considered with a compensation award of 128 weeks. In regard to possible rehabilitation in cases of major and minor eye accidents, the report says:

"Five of the nine major eye cases regained their earning capacity, while none of the four minor eye cases returned to industry. An individual study of these four minor eye cases brings out the fact that one woman has never returned because she has feared a second accident; the three other women claimed a steady lessening of their vision, and it is highly probable that their loss of sight is greater than that for which compensation was paid and that their cases warrant reopening. The difficulty or even impossibility of determining the permanent extent of eye injuries has frequently been discussed by compensation physicians. Probably the only solution is that claimants should better understand that they may always reopen their cases should the loss of sight exceed that first adjudged."

In regard to the general effect of accidents, it was shown that eye injuries cut off social activities, such as reading, writing, enjoying moving pictures, playing the piano, etc.

Of Interest to Industrial and Medical Readers

Treating the Caustic Burn, Dr. Glenn L. Coan, *National Safety News*, February, 1925. Published by the National Safety Council, 168 North Michigan Avenue, Chicago, Illinois. The subject is presented from the viewpoint of the industrial surgeon. Brief accounts are given of burns from caustic potash, zinc chloride, sulphuric acid, bleaching powder, moist chlorine gas, naphthalene, nitric and hydrochloric acids, soda ash and unslaked lime. More detailed account is given of burns, espe-

cially those of the eye, from caustic soda. The author sums up the lessons learned from experience with these burns:

1. Proper regard for protective measures prevents over 90 percent of burns—wearing rubber, canvas and cotton rather than leather or woolen goods, using goggles, gloves and vaseline for exposed parts of skin.

2. *Instant* first aid will nullify or reduce to a minimum the destructive action of the chemical.

3. If any blackened area appears on the skin, treatment should be carried out only under the direct supervision of the surgeon.

4. Every burn about the eye, however slight, should be referred to the plant surgeon or oculist immediately after an acid wash.

Accidents at the Face—Their Cause and Prevention, C. E. Anderson and D. F. Green, *National Safety News*, February, 1925. Deals with accidents at the face of the mine, including broken limbs, ribs, collar bones, bones of the hands and feet and the loss of limbs, eyes, fingers and toes. Suggests methods of preventing such hazards.

Of Interest to Medical Readers

Retinal Hemorrhages in the New Born, Max W. Jacobs, M.D., *Journal of the American Medical Association*, November 22, 1924. Gives a summary of the literature on the subject considered by Ehrenfest; a table of findings in 19 cases in which hemorrhages occurred within 24 hours, and a table of 4 cases in which there was hemorrhage when infant was examined after the first day.

The Ocular Factor in Headaches, Frank M. Dillard, M.D., *Virginia Medical Monthly*, November, 1924. Published by the Medical Society of Virginia, Richmond, Va. Presents the various types of headache indicative of eye trouble.

"The eye factor in all forms of headaches is greater than is generally supposed. Probably not less than 75 percent. are due to eye strain. The other 25 percent. can be traced to abnormalities about the nose and diseases of the nasal accessory sinuses, and to the general diseases that are accompanied with headache. Headaches due to eye strain are invariably bilateral."

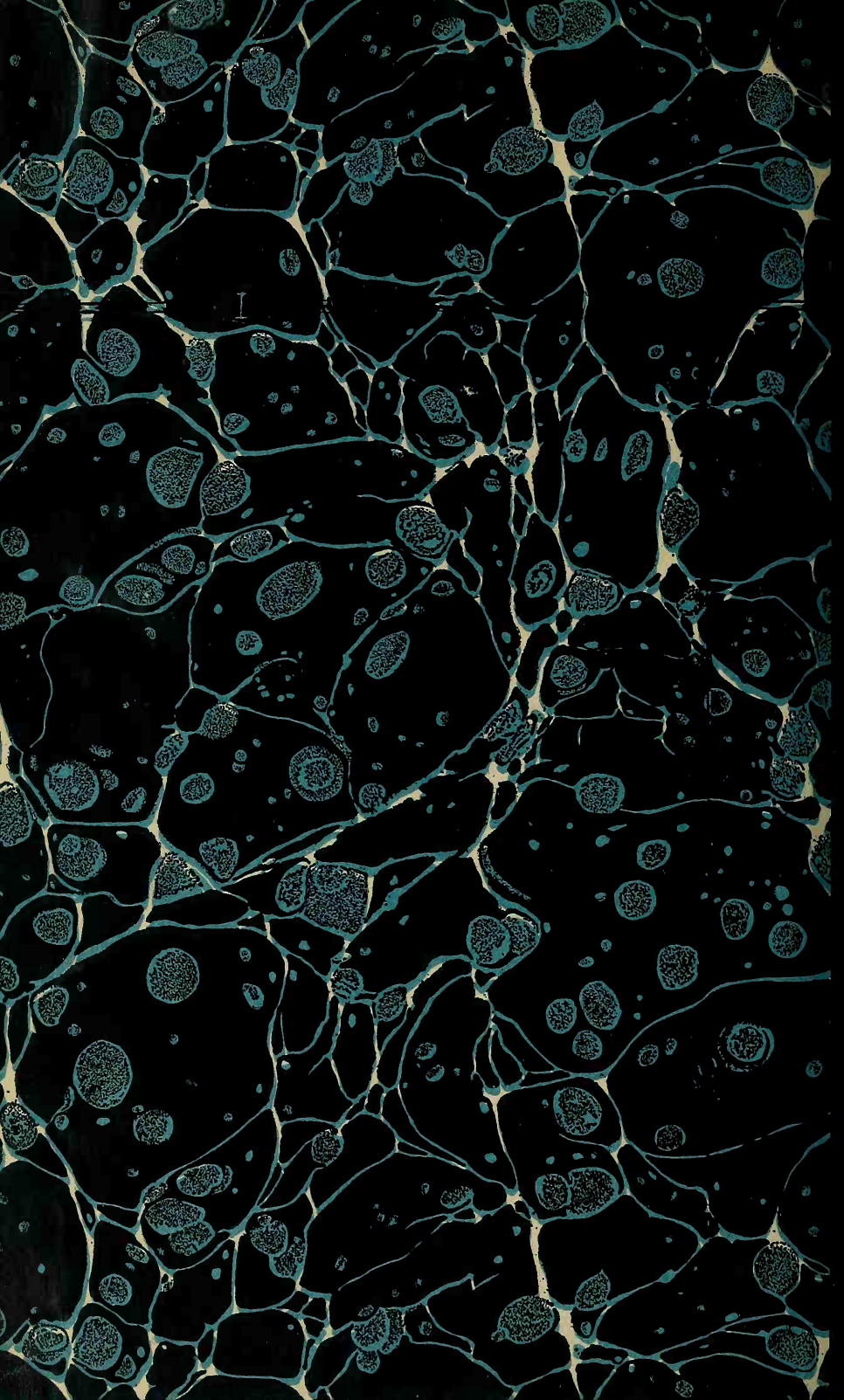
Radium in Ophthalmology With Special Reference to Its Use in Benign Affections, Laura A. Lane, M.D., *Journal of the American Medical Association*, December 6, 1924. Gives a summary of the findings of the use of radium compiled from the literature of the past 20 years as it relates to the subject of ophthalmology. Reports of a number of cases are cited.

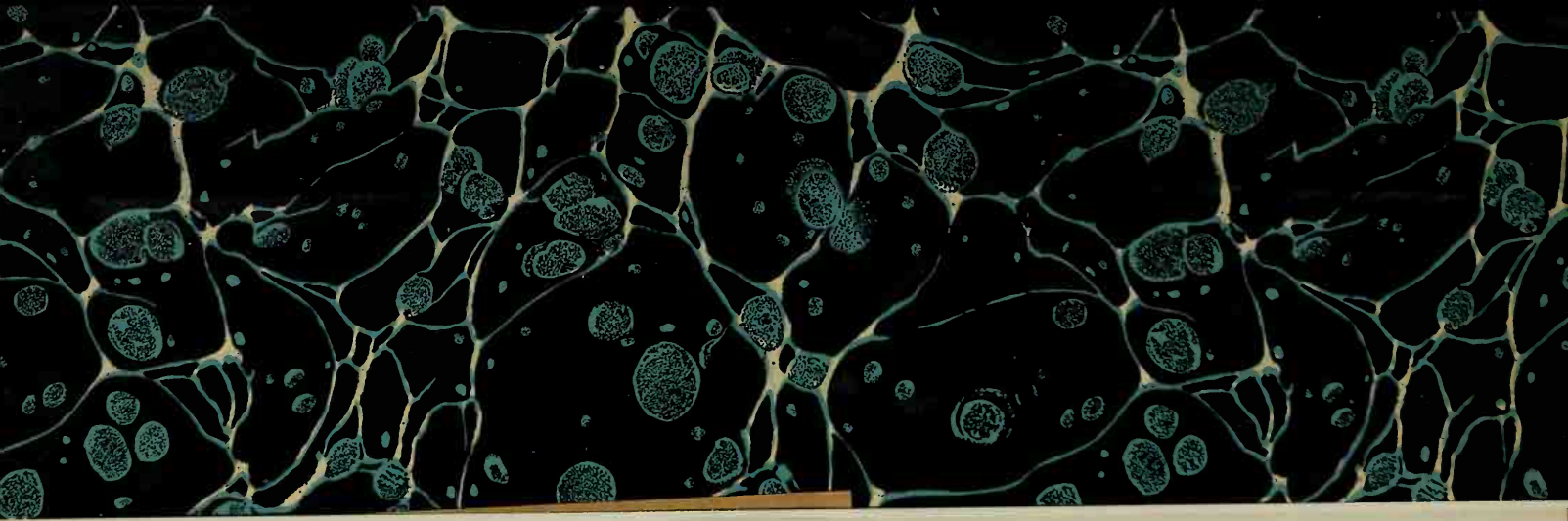
Conjunctivitis Infectiosa Necroticans (Pascheff), A. H. Stark, M.D., *Journal of the American Medical Association*, December

13, 1924. A report of four cases corresponding clinically to this condition.

THE MANAGEMENT OF EXOPHTHALMIC GOITRE, J. Marion Read, M.D., *Journal of the American Medical Association*, December 20, 1924. Calls attention to the fact that the etiology of this disease is unknown. Reviews the Hyperthyroidism Theory. Considers the mortality and morbidity statistics, the results of various forms of treatment, and the management of the disease.

THE OPHTHALMOLOGIST AND THE PSYCHONEUROSES, Lawrence K. Hunt, M.D., B. Austin Fox Riggs, M.D., *Journal of the American Medical Association*, December 20, 1924. The authors discuss functional nervous disorders, sensitiveness, suggestibility and rationalization as factors in every case of psychoneurosis. The article stresses the necessity of taking psychoneuroses into account with eye patients. "It is our conviction that, in general, if more thought were put on the personality behind the eyes, there would be fewer glasses prescribed, and many of the people who properly wear glasses now would not be using them as comfortable excuses for failure to meet the necessities of reality."





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